Medical Specialist

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/601644

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT										
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND	DEP.
1	/		/		/		51						
2		/		/		/	52						
3			/	/		/	53						
4			/	/		/	54						
5		/		/		/	55						
6		/		/		/	56						
7				/		/	57						
8	/		/		/		58						
9	/		/		/		59						
10			/		/		60						
11			/	/		/	61						
12			/		/		62						
13			/		/		63						
14	/		/		/		64						
15			/		/		65						
16			/		/		66						
17	/		/		/		67						
18		/	/		/		68						
19		/					69						
20		/					70						
21		/					71						
22		/					72						
23		/					73						
24		/				/	74						
25		/					75						
26		/					76						
27		/		/		/	77						
28	/		/		/		78						
29		/		/		/	79						
30	/		/		/		80						
31	/		/		/		81						
32	/		/		/		82						
33	/		/		/		83						
34					/		84						
35					/	/	85						
36						/	86						
37					/		87						
38						/	88						
39						/	89						
40						/	90						
41						/	91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2		3		5		TOTAL IND.						
TOTAL DEP.	23		22		31		TOTAL DEP.						
TOTAL CLAIMS	25		25		26		TOTAL CLAIMS						

PTO-1360

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT of COMMERCE
Patent and Trademark Office

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MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 09/601644

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT											
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	IND	DEP
1	1		1				51								
2		1		1			52								
3		1		1			53								
4		1		1			54								
5		1		1			55								
6		1		1			56								
7		1		1			57								
8		1		1			58								
9		1		1			59								
10		1		1			60								
11		1		1			61								
12		1		1			62								
13		1		1			63								
14		1		1			64								
15		1		1			65								
16		1		1			66								
17		1		1			67								
18	(000)	1		1			68								
19							69								
20		1		1			70								
21							71								
22							72								
23							73								
24		1		1			74								
25		1		1			75								
26							76								
27		1		1			77								
28		1		1			78								
29		1		1			79								
30	1		1				80								
31		1		1			81								
32	1		1				82								
33		1		1			83								
34	1		1				84								
35		1					85								
36		1					86								
37	1						87								
38		1		1			88								
39		1		1			89								
40				1			90								
41		1					91								
42		1		1			92								
43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	5		5				TOTAL IND.								
TOTAL DEP.	32		32				TOTAL DEP.								
TOTAL CLAIMS	31		31				TOTAL CLAIMS								